

MAY 14 2010

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UNITED STATES HOUSE OF REPRESENTATIVES  
FINANCIAL DISCLOSURE STATEMENTFORM B  
For New Members, Candidates, and New EmployeesName: Patrick F Wilson

Daytime Telephone: \_\_\_\_\_

U.S. HOUSE OF REPRESENTATIVES

Office of the Clerk

18 MAY 23 PM 2: 06

LEGISLATIVE RESOURCE CENTER

FILER STATUS	
<input checked="" type="checkbox"/>	New Member of or Candidate for U.S. House of Representatives
Candidates – Date of Election: <u>11/6/18</u>	
<input type="checkbox"/> New Officer or Employee	
Employing Office: _____	

Period Covered: <u>January 1, 2017</u> to <u>May 6, 2018</u>
<input type="checkbox"/> Check if Amendment

A \$200 penalty shall be assessed against any individual who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

A. Did you, your spouse, or your dependent child:

- Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or
- Make more than \$200 in unearned income from any reportable asset during the reporting period?

Yes  No

E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? Yes  No

C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?

Yes  No

F. Do you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing? Yes  No

D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? Yes  No

J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years? Yes  No

**ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"**  
**THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE**

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS

**TRUSTS** – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?

**EXEMPTION** – Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.

Yes  No

# SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: Patrick F. Nelson

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BLOCK A		BLOCK B		BLOCK C		BLOCK D	
Assets and/or Income Sources		Value of Asset		Type of Income		Amount of Income	
<p>Identify (a) each asset held for investment or income and with a fair market value you use a valuation method other than fair market value, exceeding \$1,000 at the end of the reporting period, please specify the method used.</p> <p>(b) any other reportable asset or source of income which generated more than \$200 in “unearned” income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use only ticker symbols).</p>		<p>Indicate value of asset at close of the reporting period. If an asset was sold during the reporting period and is included only because it generated income, the value should be “None.”</p> <p>For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.</p>		<p>Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k)s, IRAs, or 529 accounts), you may check the “Tax-Deferred” column, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check “None” if the asset generated no income during the reporting period.</p>		<p>For assets for which you checked “Tax-Deferred” in Block C, you may check the “None” column. For all other assets indicate the category of income by checking the appropriate box below. Dividends, Interest, Dividends, Interest, and Capital Gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check “None” if no income was earned or generated.</p>	
SP. DC. UT	EEF	A B C D E F G H I J K L M	I II III IV V VI VII VIII IX X XI XII	I II III IV V VI VII VIII IX X XI XII	I II III IV V VI VII VIII IX X XI XII		
<p><b>For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.</b></p>		<p>None \$1-\$1,000 \$1,001-\$15,000 \$15,001-\$50,000 \$50,001-\$100,000 \$100,001-\$250,000 \$250,001-\$500,000 \$500,001-\$1,000,000 \$1,000,001-\$5,000,000 \$5,000,001-\$25,000,000 \$25,000,001-\$50,000,000 Over \$50,000,000 Spouse/DC Asset over \$1,000,000*</p>		<p>None \$1-\$200 \$201-\$1,000 \$1,001-\$2,500 \$2,501-\$5,000 \$5,001-\$15,000 \$15,001-\$50,000 \$50,001-\$100,000 \$100,001-\$1,000,000 \$1,000,001-\$5,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000*</p>		<p>None \$1-\$200 \$201-\$1,000 \$1,001-\$2,500 \$2,501-\$5,000 \$5,001-\$15,000 \$15,001-\$50,000 \$50,001-\$100,000 \$100,001-\$1,000,000 \$1,000,001-\$5,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000*</p>	
<p><b>For rental land and other real property held for investment, provide a complete address or description, e.g., “rental property,” and a city and state.</b></p>		<p>For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.</p>		<p>For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.</p>		<p>“Column M is for assets held by your spouse or dependent child in which you have no interest.</p>	
<p><b>If you have a privately-traded fund that is an Exempt Investment Fund, please check the “EIF” box.</b></p>		<p><b>If you so choose, you may indicate that an asset or income source is that of your spouse (SP), or dependent child (DC), or jointly held with anyone (UT).</b></p>		<p><b>In the optional column on the far left, for a detailed discussion of Schedule A requirements, please refer to the instruction booklet.</b></p>		<p>“Column XI is for assets held by your spouse or dependent child in which you have no interest.</p>	
<p><b>Examples:</b> Simon &amp; Schuster ABC Hedge Fund</p>		<p><b>Block A Examples:</b> Bitcoin Bitcoin Cash Ether Bitcoin</p>		<p><b>Block B Examples:</b> None \$1-\$200 \$201-\$1,000 \$1,001-\$2,500 \$2,501-\$5,000 \$5,001-\$15,000 \$15,001-\$50,000 \$50,001-\$100,000 \$100,001-\$1,000,000 \$1,000,001-\$5,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000*</p>		<p><b>Block C Examples:</b> None \$1-\$200 \$201-\$1,000 \$1,001-\$2,500 \$2,501-\$5,000 \$5,001-\$15,000 \$15,001-\$50,000 \$50,001-\$100,000 \$100,001-\$1,000,000 \$1,000,001-\$5,000,000 Over \$5,000,000 Spouse/DC Income over \$1,000,000*</p>	
<p><b>Use additional sheets if more space is required.</b></p>							

**SCHEDULE A – ASSETS & “UNEARNED INCOME”**

Name: *Patrick F. Wilson*

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BLOCK A Assets and/or Income Sources		BLOCK B Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income											
				A	B	C	D	E	F	G	H	I	J	K	L
None															
\$1-\$1,000															
\$1,001-\$15,000															
\$15,001-\$50,000															
\$50,001-\$100,000															
\$100,001-\$250,000															
\$250,001-\$500,000															
\$500,001-\$1,000,000															
\$1,000,001-\$5,000,000															
\$5,000,001-\$25,000,000															
\$25,000,001-\$50,000,000															
Over \$50,000,000															
Spouse/DC Asset over \$1,000,000*															
NONE															
DIVIDENDS															
RENT															
INTEREST															
CAPITAL GAINS															
EXCEPTED/BLIND TRUST															
TAX-DEFERRED															
Other Type of Income (Specify: e.g., Partnership Income or Farm Income)															
None	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	Current Year		
\$1-\$200															
\$201-\$1,000															
\$1,001-\$2,500															
\$2,501-\$5,000															
\$5,001-\$15,000															
\$15,001-\$50,000															
\$50,001-\$100,000															
\$100,001-\$1,000,000															
\$1,000,001-\$5,000,000															
Over \$5,000,000															
Spouse/DC Income over \$1,000,000*															
None	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	Preceding Year		
\$1-\$200															
\$201-\$1,000															
\$1,001-\$2,500															
\$2,501-\$5,000															
\$5,001-\$15,000															
\$15,001-\$50,000															
\$50,001-\$100,000															
\$100,001-\$1,000,000															
\$1,000,001-\$5,000,000															
Over \$5,000,000															
Spouse/DC Income over \$1,000,000*															

Use additional sheets if more space is required.

## SCHEDULE C – EARNED INCOME

Name: Patrick F Nelson

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

**EXCLUDE:** Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

**INCOME LIMITS and PROHIBITED INCOME:** Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2015 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,225. The 2016 limit is \$27,495. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

Source (include date of receipt for honoraria)	Type	Amount	
		Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
State of Maryland	Salary	\$20,000	\$16,000
Civil War Roundtable (Oct. 2)	Spouse Speech	\$0	\$1,000
Ontario County Board of Education	Spouse Salary	N/A	N/A

New York State Assembly

St. Hillwater United Church

Salary  
Hourly  
\$  
11,640  
153

## SCHEDULE D - LIABILITIES

Name: **Patrick F. Wilson**

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Report liabilities of over \$10,000 owed to any one creditor **at any time** during the reporting period. **New Members:** Members are required to report all liabilities secured by real property including mortgages on their personal residence. **Exclude:** Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a **revolving charge account** (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. \*Column K is for liabilities held solely by your spouse or dependent child.

SP, DC, JR	Creditor	Date Liability Incurred MO/YR	Type of Liability	Amount of Liability									
				A	B	C	D	E	F	G	H	I	J
Example	First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE	\$10,001-\$15,000									
				\$15,001-\$50,000									
				\$50,001-\$100,000									
				\$100,001-\$250,000									
				\$250,001-\$500,000									
				\$500,001-\$1,000,000									
				\$1,000,001-\$5,000,000									
				\$5,000,001-\$25,000,000									
				\$25,000,001-\$50,000,000									
				Over \$50,000,000									
				Over \$1,000,000* (Spouse/DC Liability)									

## SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. **Exclude:** Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. **New Members and second-year candidates** report positions held in the reporting period and the current calendar year. **First-year candidates and new employees** report positions held in the current calendar year and **two** previous years.

Position	Name of Organization
Special Projects Coordinator	NY Assembly Action Network
Board of Directors, Executive Committee	NY Assembly Action Network
Planning, Fundraising	Wilmington Financial Services Inc.
Postural Training Committee	North Central Chiropractic
Ruling Elder	Stillwater United Church

## SCHEDULE F – AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

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**SCHEDULE J – COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE**

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and **two** prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. **Exclude:** Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. **Do not repeat information listed on Schedule C.**

Use additional sheets if more space is required.

**FILER NOTES  
(Optional)**

Name: Patrick F. Nelson

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NOTE NUMBER	NOTES
①	<p>I currently have an outstanding receivable due from Liquidal Inc. in the amount of \$30,00. I have received a \$20,00 payment in April of 2012 from Liquidal Inc. and will be receiving \$170/month for the next twelve months to pay off the \$30,00 receivable.</p> <p>The monthly payments commence in May 2012. These payments are for prior services as the Managing Director of the Company.</p>

Use additional sheets if more space is required.